

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HellerHighWater PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		122804.77
(b) Cash on Hand at Beginning of Reporting Period.....	134816.31	
(c) Total Receipts (from Line 19)	59000.00	310734.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	193816.31	433539.17
7. Total Disbursements (from Line 31).....	25197.12	264919.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	168619.19	168619.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HellerHighWater PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	29500.00	45837.28
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	29500.00	45837.28
(b) Political Party Committees	0.00	3897.12
(c) Other Political Committees (such as PACs).....	29500.00	261000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	59000.00	310734.40
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	59000.00	310734.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	59000.00	310734.40

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5197.12	69919.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5197.12	69919.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	176000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	4000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25197.12	264919.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25197.12	264919.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	59000.00	310734.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59000.00	310734.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5197.12	69919.98
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5197.12	69919.98

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HellerHighWater PAC

A. Mr. Bill M. Sanderson
Full Name (Last, First, Middle Initial)

Mailing Address 774 Mays Boulevard #10
PMB #466

City State Zip Code
Incline Village NV 89451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
08 / 21 / 2014
Transaction ID : 40904.C245

Amount of Each Receipt this Period
2000.00

Receipt

B. Mr. Thomas Seeno
Full Name (Last, First, Middle Initial)

Mailing Address 1850 Mount Diablo Boulevard #440

City State Zip Code
Walnut Creek CA 94596

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Seeno Construction Co. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 07 / 2014
Transaction ID : 40807.C232

Amount of Each Receipt this Period
5000.00

Receipt

C. Mr. Albert Seeno Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 4021 Port Chicago Highway

City State Zip Code
Concord CA 94520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Albert Seeno Construction Co. Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 07 / 2014
Transaction ID : 40807.C233

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	12000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial) A. Ms. Natale Carasali		Date of Receipt MM / DD / YYYY 08 / 07 / 2014 Transaction ID : 40807.C234
Mailing Address 380 Brinkby Avenue #B		Amount of Each Receipt this Period 5000.00
City Reno	State NV	Zip Code 89509
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Peppermill Casinos Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. William Paganetti		Date of Receipt MM / DD / YYYY 08 / 07 / 2014 Transaction ID : 40807.C235
Mailing Address 380 Brinkby Avenue #B		Amount of Each Receipt this Period 5000.00
City Reno	State NV	Zip Code 89509
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Peppermill Casinos Inc.	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Mr. Whitaker Askew		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 Transaction ID : 40904.C242
Mailing Address 1809 Stirrup Lane		Amount of Each Receipt this Period 1500.00
City Alexandria	State VA	Zip Code 22308
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer American Gaming Assoc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	11500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

A. Mr. J. John Morrey
Full Name (Last, First, Middle Initial)

Mailing Address 2279 Rainwood Court

City Reno	State NV	Zip Code 89509
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Morrey Distributing Co.	Occupation Owner
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	21	/	2014

Transaction ID : 40904.C243

Amount of Each Receipt this Period
2000.00

Receipt

B. Mrs. Dell Elias
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6174

City Incline Village	State NV	Zip Code 89450
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	21	/	2014

Transaction ID : 40904.C244

Amount of Each Receipt this Period
2000.00

Receipt

C. Dr. James Colgan
Full Name (Last, First, Middle Initial)

Mailing Address 5250 Numaga Pass Road

City Carson City	State NV	Zip Code 89703
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	21	/	2014

Transaction ID : 40904.C246

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	29500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial) A. International Game Technology PAC		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 Transaction ID : 40904.C241
Mailing Address 6355 South Buffalo Drive		Amount of Each Receipt this Period 2500.00
City Las Vegas	State NV	Zip Code 89113
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. UBS Americas Inc. PAC		Date of Receipt MM / DD / YYYY 08 / 31 / 2014 Transaction ID : 40904.C251
Mailing Address 1501 K Street NW #1100		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00012245	Receipt	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. American Society Anesthesiologists PAC		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 Transaction ID : 40904.C240
Mailing Address 1061 American Lane		Amount of Each Receipt this Period 2500.00
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)
A. Barrick Gold Of North America Inc. PAC

Mailing Address 136 East South Temple #1800

City Salt Lake City	State UT	Zip Code 84111
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2014

Transaction ID : 40807.C236

Amount of Each Receipt this Period
5000.00

Receipt

Full Name (Last, First, Middle Initial)
B. Property Casualty Insurers Assoc. PAC

Mailing Address 444 North Capitol Street NW #801

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2014

Transaction ID : 40807.C238

Amount of Each Receipt this Period
2500.00

Receipt

Full Name (Last, First, Middle Initial)
C. Verizon Communications Inc/

Mailing Address Verizon Wireless Good Govt PAC
1300 I Street NW 4th Floor

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2014

Transaction ID : 40904.C248

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)
A. Independent Community Bankers PAC
 Mailing Address 1615 L Street NW #900
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00032698
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2014
Transaction ID : 40904.C250
 Amount of Each Receipt this Period
 1000.00
 Receipt

Full Name (Last, First, Middle Initial)
B. Independent Community Bankers PAC
 Mailing Address 1615 L Street NW #900
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00032698
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2014
Transaction ID : 40904.C249
 Amount of Each Receipt this Period
 1000.00
 Receipt

Full Name (Last, First, Middle Initial)
C. Airbus Group Inc. PAC
 Mailing Address 2550 Wasser Terrace #9000
 City Herndon State VA Zip Code 20171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2014
Transaction ID : 40807.C237
 Amount of Each Receipt this Period
 2500.00
 Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)
A. Intel PAC
 Mailing Address 1155 F Street NW #1025
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : 40904.C239
 Amount of Each Receipt this Period
 2500.00
 Receipt

Full Name (Last, First, Middle Initial)
B. Sequa-Chromalloy PAC
 Mailing Address 300 Blaisdell Road
 City Orangeburg State NY Zip Code 10962
 FEC ID number of contributing federal political committee. **C** C00235911
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : 40904.C247
 Amount of Each Receipt this Period
 2500.00
 Receipt

Full Name (Last, First, Middle Initial)
C.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	29500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)

A. October Inc.

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : 40807.E233

Amount of Each Disbursement this Period

724.56

TRAVEL

Full Name (Last, First, Middle Initial)

B. Zinser Photography

Mailing Address 19038 Kenney Way

City Caldwell State ID Zip Code 83605-

Purpose of Disbursement
Photography Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2014

Transaction ID : 40731.E231

Amount of Each Disbursement this Period

700.00

PHOTOGRAPHY SERVICES

Full Name (Last, First, Middle Initial)

C. October Inc.

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : 40807.E232

Amount of Each Disbursement this Period

3750.00

CONSULTING FUNDRAISING

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5174.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)

A. October Inc.

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : 40807.E234

Amount of Each Disbursement this Period

22.56

POSTAGE

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

22.56

5197.12

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HellerHighWater PAC

Full Name (Last, First, Middle Initial)

A. Sullivan For Senate

Mailing Address 750 East Fireweed Lane #202

City Anchorage State AK Zip Code 99503-

Purpose of Disbursement
PRIMARY DEBT

Candidate Name
DAN SULLIVAN

Office Sought: House
 Senate
 President
State: AK District: 00

Disbursement For:
 Primary General
 Other (specify) **Primary DEBT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2014

Transaction ID : 40904.E238

Amount of Each Disbursement this Period

5000.00

PRIMARY DEBT

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5000.00

20000.00
